

Application Data Sheet
APPLICATION INFORMATION

Application Number::
Filing Date::
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD Disks:
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?:: No
Number of Copies of CRF::
Title:: TESTING DISTRIBUTED SERVICES BY USING
MULTIPLE BOOTS TO TIMESHARE A SINGLE
COMPUTER
Attorney Docket Number:: 223251
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 7
Total Drawing Sheets:: 10
Small Entity?:: No
Latin Name::
Variety denomination name::
Petition Included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Billy
Middle Name:: J.
Family Name:: Fuller
Name Suffix::
City of Residence:: Woodinville
State or Prov. of Residence:: Washington
Country of Residence:: US
Street of mailing address:: 15319 181st Avenue NE
City of mailing address:: Woodinville
State or Province of mailing address:: Washington
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98072

Inventor Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Samuel
Middle Name:: R.
Family Name:: Devasahayam
Name Suffix::
City of Residence:: Kirkland
State or Prov. of Residence:: Washington
Country of Residence:: US
Street of mailing address:: 10132 NE 64th St., Apt. #2
City of mailing address:: Kirkland
State or Province of mailing address:: Washington
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98033

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 38887
Phone:: (312) 616-5600
Fax:: (312) 616-5700
E-mail Address:: mail@leydig.com

REPRESENTATIVE INFORMATION

Representative Customer Number:: 38887

Representative Designation:: Registration Number:: Representative Name::

DOMESTIC PRIORITY INFORMATION

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

FOREIGN APPLICATION INFORMATION

Country:: Application Number:: Filing Date:: Priority Claimed

ASSIGNEE INFORMATION

Assignee name:: Microsoft Corporation
Street of mailing address:: One Microsoft Way
City of mailing address:: Redmond
State or Province of mailing address:: Washington
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98052